

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF OHIO

Case number (if known) _____

Chapter you are filing under:

☒ Chapter 7☐ Chapter 11☐ Chapter 12☐ Chapter 13☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Andrew

First name

James

Middle name

Bring your picture identification to your meeting with the trustee.

Garchar

Last name and Suffix (Sr., Jr., II, III)

Tammy

First name

Noel

Middle name

Feo-Garchar

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

Andy Garchar**Tammy N. Feo****Tammy N. Garchar****3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)****xxx-xx-2011****xxx-xx-7078**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

☒ I have not used any business name or EINs.

☒ I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s)

Business name(s)

EINs

EINs

5. Where you live

**239 Clingan Road
Struthers, OH 44471**

Number, Street, City, State & ZIP Code

Mahoning

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

**46829 Church Street
New Waterford, OH 44445**

Number, Street, City, State & ZIP Code

Columbiana

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13
-
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
-
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
☐ Yes.
- | | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
-
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No
☐ Yes.
- | | |
|-----------------------------|---------------------------|
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
-
11. **Do you rent your residence?** ☒ No. Go to line 12.
☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

 Name of business, if any

 Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

☒ No.

☐ Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property? _____

 Number, Street, City, State & Zip Code

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a.	Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.
	16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.
	16c.	State the type of debts you owe that are not consumer debts or business debts _____

17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.	I am not filing under Chapter 7. Go to line 18. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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18. How many Creditors do you estimate that you owe?	<input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
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19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Andrew James Garchar

Andrew James Garchar

Signature of Debtor 1

/s/ Tammy Noel Feo-Garchar

Tammy Noel Feo-Garchar

Signature of Debtor 2

Executed on **6/11/2019**

MM / DD / YYYY

Executed on **6/11/2019**

MM / DD / YYYY

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number *(if known)*

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John H. Chaney, III

Signature of Attorney for Debtor

Date

6/11/2019

MM / DD / YYYY

John H. Chaney, III

Printed name

Daniel Daniluk, LLC

Firm name

**1129 Niles-Cortland Road, SE
 Warren, OH 44484-2542**

Number, Street, City, State & ZIP Code

Contact phone **330-609-9999**

Email address

jchaney@daniluklaw.com

0056193 OH

Bar number & State

Fill in this information to identify your case:

Debtor 1	Andrew James Garchar		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	Tammy Noel Feo-Garchar		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			
Case number _____ (if known)			

☐ Check if this is an amended filing
Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$	215,000.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$	257,780.48
1c. Copy line 63, Total of all property on Schedule A/B.....	\$	472,780.48

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$	267,311.58
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$	10,564.30
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$	311,415.44
Your total liabilities		\$ 589,291.32

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$	7,751.23
5. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$	7,489.35

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **7,625.31**

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

	Total claim
From Part 4 on <i>Schedule E/F</i>, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 10,564.30
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 81,225.34
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 91,789.64

Fill in this information to identify your case and this filing:

Debtor 1	Andrew James Garchar		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Tammy Noel Feo-Garchar		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			
Case number _____			

☐ Check if this is an amended filing
Official Form 106A/B**Schedule A/B: Property****12/15**

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**
☐ No. Go to Part 2.

☒ Yes. Where is the property?

1.1

239 Clingan Road

Street address, if available, or other description

Struthers OH 44471-0000

City State ZIP Code

Mahoning

County

What is the property? Check all that apply

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$215,000.00

Current value of the portion you own?

\$215,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Fee simple
☐ Check if this is community property (see instructions)

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

If you own or have more than one, list here:

1.2

Disney Vacation Club
DVCMC Association Manager
PO Box 470727

Street address, if available, or other description

Kissimmee FL 34747-0000

City State ZIP Code

Orange

County

What is the property? Check all that apply

- ☐ Single-family home
☐ Duplex or multi-unit building
☒ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☒ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Debtors have 3 separate deeds from Orange County, FL containing undivided 0.3284% interest in Unit 99A at the Disney Saratoga Springs Resort purchased January 2007. Parties have 15 shares for each account for a total of 45 shares.

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Unknown

Current value of the portion you own?

Unknown

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$215,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1 Make: **Dodge**
 Model: **Durango**
 Year: **2015**
 Approximate mileage: **72,000**
 Other information:

Who has an interest in the property? Check one

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$20,650.00

Current value of the portion you own?

\$20,650.00

3.2 Make: **Nissan**
 Model: **Altima**
 Year: **2017**
 Approximate mileage: **103,079**
 Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$14,550.00

Current value of the portion you own?

\$14,550.00

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$35,200.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe.....

Misc. household goods and furnishings including, but not limited to, consisting of couch, chairs, endtables, beds, dressers, night stands, kitchen table & chairs, microwave, fridge, stove, washer, dryer, misc. lawn tools, and lawn mower.

\$2,000.00

Misc. household goods and furnishings including, but not limited to, consisting of couch, chairs, endtables, beds, dressers, night stands, kitchen table & chairs, microwave, and misc. lawn tools.

\$1,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☐ No
☒ Yes. Describe.....

5 cell phones, 3 computers, 7 TVs, 2 gaming devices, 1 DVD/Blue Ray

\$2,000.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☒ No
☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No
☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- ☐ No
☒ Yes. Describe.....

9mm Smith & Wesson (seized by Mahoning County Sheriff's Department and in their custody, control and possession until December 2019. Debtor Husband is unsure if/when it will be returned)

\$500.00

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Clothing of Debtors and children

\$2,000.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

Wedding set and right hand diamond ring (in Debtor Husband's possession) and emerald ring

\$2,000.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☒ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$10,000.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No

☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes.....

Institution name:

17.1. **Checking**

Citizens Bank

\$0.55

17.2. **Checking**

Huntington Bank

\$0.00

17.3. **Investing/Savings**

Acorns Account

\$89.90

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☐ No

☒ Yes.....

Institution or issuer name:

E* Trade account consisting 2,000 shares of Nanologix (\$0.0370 per share) and 25 shares of Rite Aid (\$7.30 per share)

\$232.50

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☐ No

☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

OT Plus, Ltd (business operated by Debtor-Husband to provide occupational therapy to patients at facilities and in their home, business assets consist of checking accounts at Citizens Bank (ending 593-1 and 388-1), a computer, a tablet, a printer/copier/scanner/fax , and a desk)

100 %

Unknown

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account:

Institution name:

401(a)

STRS (balance as of 12/31/2018)

\$212,257.53

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☐ No

☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

2018 Income Tax Refund (Total refund of \$2,998.00 to be seized and to be applied to priority obligation owed by Debtor-Husband to IRS)

Federal

\$0.00

2018 Income Tax Refund

Federal

Unknown

2018 Income Tax Refund

State

Unknown

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No

☒ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Term life insurance policy through employer

Wife and minor children

\$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.....

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☒ No
☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$212,580.48

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$215,000.00
56. Part 2: Total vehicles, line 5	\$35,200.00	
57. Part 3: Total personal and household items, line 15	\$10,000.00	
58. Part 4: Total financial assets, line 36	\$212,580.48	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	+ \$0.00	
62. Total personal property. Add lines 56 through 61...	\$257,780.48	Copy personal property total \$257,780.48
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$472,780.48

Fill in this information to identify your case:

Debtor 1	Andrew James Garchar		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	Tammy Noel Feo-Garchar		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			
Case number _____ (if known)			

☐ Check if this is an amended filing
Official Form 106C**Schedule C: The Property You Claim as Exempt****4/19**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
239 Clingan Road Struthers, OH 44471 Mahoning County Line from <i>Schedule A/B</i> : 1.1	\$215,000.00	<input checked="" type="checkbox"/> \$145,425.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(1)
2015 Dodge Durango 72,000 miles Line from <i>Schedule A/B</i> : 3.1	\$20,650.00	<input checked="" type="checkbox"/> \$4,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(2)
2017 Nissan Altima 103,079 miles Line from <i>Schedule A/B</i> : 3.2	\$14,550.00	<input checked="" type="checkbox"/> \$4,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(2)
Misc. household goods and furnishings including, but not limited to, consisting of couch, chairs, endtables, beds, dressers, night stands, kitchen table & chairs, microwave, fridge, stove, washer, dryer, misc. lawn tools, and lawn mower. Line from <i>Schedule A/B</i> : 6.1	\$2,000.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Misc. household goods and furnishings including, but not limited to, consisting of couch, chairs, endtables, beds, dressers, night stands, kitchen table & chairs, microwave, and misc. lawn tools. Line from Schedule A/B: 6.2	\$1,500.00	<input checked="" type="checkbox"/> \$1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
5 cell phones, 3 computers, 7 TVs, 2 gaming devices, 1 DVD/Blue Ray Line from Schedule A/B: 7.1	\$2,000.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
9mm Smith & Wesson (seized by Mahoning County Sheriff's Department and in their custody, control and possession until December 2019. Debtor Husband is unsure if/when it will be returned) Line from Schedule A/B: 10.1	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Clothing of Debtors and children Line from Schedule A/B: 11.1	\$2,000.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Wedding set and right hand diamond ring (in Debtor Husband's possession) and emerald ring Line from Schedule A/B: 12.1	\$2,000.00	<input checked="" type="checkbox"/> \$3,400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Checking: Citizens Bank Line from Schedule A/B: 17.1	\$0.55	<input checked="" type="checkbox"/> \$0.55 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
Checking: Huntington Bank Line from Schedule A/B: 17.2	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
Investing/Savings: Acorns Account Line from Schedule A/B: 17.3	\$89.90	<input checked="" type="checkbox"/> \$89.90 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
E* Trade account consisting 2,000 shares of Nanologix (\$0.0370 per share) and 25 shares of Rite Aid (\$7.30 per share) Line from Schedule A/B: 18.1	\$232.50	<input checked="" type="checkbox"/> \$232.50 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
OT Plus, Ltd (business operated by Debtor-Husband to provide occupational therapy to patients at facilities and in their home, business assets consist of checking accounts at Citizens Bank (ending 593-1 and 388-1), a computer, a tablet, a printer/copier/sc Line from Schedule A/B: 19.1	Unknown	<input checked="" type="checkbox"/> \$2,550.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(5)
OT Plus, Ltd (business operated by Debtor-Husband to provide occupational therapy to patients at facilities and in their home, business assets consist of checking accounts at Citizens Bank (ending 593-1 and 388-1), a computer, a tablet, a printer/copier/sc Line from Schedule A/B: 19.1	Unknown	<input checked="" type="checkbox"/> \$677.05 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(3)
OT Plus, Ltd (business operated by Debtor-Husband to provide occupational therapy to patients at facilities and in their home, business assets consist of checking accounts at Citizens Bank (ending 593-1 and 388-1), a computer, a tablet, a printer/copier/sc Line from Schedule A/B: 19.1	Unknown	<input checked="" type="checkbox"/> \$2,650.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(18)
401(a): STRS (balance as of 12/31/2018) Line from Schedule A/B: 21.1	\$212,257.53	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. §§ 3307.71, 3309.66
Term life insurance policy through employer Beneficiary: Wife and minor children Line from Schedule A/B: 31.1	\$0.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(e), 3923.19

3. **Are you claiming a homestead exemption of more than \$170,350?**
 (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)
- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Fill in this information to identify your case:

Debtor 1	Andrew James Garchar		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	Tammy Noel Feo-Garchar		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF OHIO		
Case number (if known)			

☐ Check if this is an amended filing
Official Form 106D**Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Bank of America NA <small>Creditor's Name</small> ATTN: Bankruptcy 100 North Tryon Street Charlotte, NC 28255 <small>Number, Street, City, State & Zip Code</small>	Describe the property that secures the claim: 239 Clingan Road Struthers, OH 44471 Mahoning County As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$2,693.74	\$215,000.00
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	Date debt was incurred _____ Last 4 digits of account number _____		\$0.00

2.2 Bank of America NA <small>Creditor's Name</small> ATTN: Bankruptcy 100 North Tryon Street Charlotte, NC 28255 <small>Number, Street, City, State & Zip Code</small>	Describe the property that secures the claim: 239 Clingan Road Struthers, OH 44471 Mahoning County As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) 2018 JD 903	\$19,855.31	\$215,000.00	\$0.00
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt	Date debt was incurred _____ Last 4 digits of account number _____			

Debtor 1 **Andrew James Garchar**
 First Name Middle Name Last Name

Debtor 2 **Tammy Noel Feo-Garchar**
 First Name Middle Name Last Name

Case number (if known) _____

2.3 C&F Finance Company Creditor's Name ATTN: Bankruptcy Dept PO Box 2129 Richmond, VA 23218 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 2017 Nissan Altima 103,079 miles As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Purchase Money Security	\$18,078.37 \$14,550.00 \$3,528.37
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Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred _____ Last 4 digits of account number **5404**

2.4 Chrysler Capital Creditor's Name ATTN: Bankruptcy PO Box 961275 Fort Worth, TX 76161 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 2015 Dodge Durango 72,000 miles As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Purchase Money Security	\$19,332.00 \$20,650.00 \$0.00
--	---	---

Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred _____ Last 4 digits of account number **9388**

2.5 Mr. Cooper Creditor's Name 8590 Cypress Waters Blvd. Coppell, TX 75019 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 239 Clingan Road Struthers, OH 44471 Mahoning County As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) First Mortgage	\$130,352.16 \$215,000.00 \$0.00
--	---	---

Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred _____ Last 4 digits of account number **4147**

Debtor 1 **Andrew James Garchar**
 First Name Middle Name Last Name

Debtor 2 **Tammy Noel Feo-Garchar**
 First Name Middle Name Last Name

Case number (if known) _____

2.6 So-Fi Lending Describe the property that secures the claim: **\$77,000.00** **\$215,000.00** **\$14,901.21**

Creditor's Name

ATTN: Bankruptcy
375 Healdsburg Avenue,
#2
Healdsburg, CA 95448

Number, Street, City, State & Zip Code

239 Clingan Road Struthers, OH
44471 Mahoning County

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☒ Judgment lien from a lawsuit☒ Other (including a right to offset) **2018 JD 205**

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number **367x**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$267,311.58

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$267,311.58**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.



Name, Number, Street, City, State & Zip Code

Chrysler Capital
ATTN: Bankruptcy
PO Box 961278
Fort Worth, TX 76161

On which line in Part 1 did you enter the creditor? **2.4**

Last 4 digits of account number ____



Name, Number, Street, City, State & Zip Code

Levy & Associates
4645 Executive Drive
Columbus, OH 43220

On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number ____



Name, Number, Street, City, State & Zip Code

Mr. Cooper
P.O. Box 60516
City of Industry, CA 91716-0516

On which line in Part 1 did you enter the creditor? **2.5**

Last 4 digits of account number ____



Name, Number, Street, City, State & Zip Code

So-Fi Lending
ATTN: Bankruptcy
PO Box 29372
San Francisco, CA 94129

On which line in Part 1 did you enter the creditor? **2.6**

Last 4 digits of account number ____



Name, Number, Street, City, State & Zip Code

So-Fi Lending
ATTN: Bankruptcy
Dept #3534
PO Box 123534
Dallas, TX 75312

On which line in Part 1 did you enter the creditor? **2.6**

Last 4 digits of account number ____

Debtor 1 **Andrew James Garchar**
 First Name Middle Name Last Name

Debtor 2 **Tammy Noel Feo-Garchar**
 First Name Middle Name Last Name

Case number (if known) _____

☐ Name, Number, Street, City, State & Zip Code
So-Fi Lending Corp
ATTN: Bankruptcy
One Letter Drive
Suite A, Suite #4700
San Francisco, CA 94129

On which line in Part 1 did you enter the creditor? **2.6**

Last 4 digits of account number ____

☐ Name, Number, Street, City, State & Zip Code
Zwicker & Associates PC
2300 Litton Lane #200
Hebron, KY 41048

On which line in Part 1 did you enter the creditor? **2.6**

Last 4 digits of account number ____

☐ Name, Number, Street, City, State & Zip Code
Zwicker & Associates, PC
P.O. Box 9013
Andover, MA 01810

On which line in Part 1 did you enter the creditor? **2.6**

Last 4 digits of account number ____

☐ Name, Number, Street, City, State & Zip Code
Zwicker & Associates, PC
80 Minuteman Road
Andover, MA 01810

On which line in Part 1 did you enter the creditor? **2.6**

Last 4 digits of account number ____

Fill in this information to identify your case:

Debtor 1	Andrew James Garchar		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	Tammy Noel Feo-Garchar		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			
Case number _____ (if known)			

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** claims and Part 2 for creditors with **NONPRIORITY** claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**
☐ No. Go to Part 2.

☒ Yes.
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	IRS Priority Creditor's Name c/o Bankruptcy Dept PO Box 7346 Philadelphia, PA 19101 Number Street City State Zip Code	Last 4 digits of account number _____	\$10,564.30	\$0.00
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	\$10,564.30	

2013 and 2014 Personal Income Taxes (Returns Timely Filed)
Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.
Total claim

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.1

Akron Children's Hospital

Nonpriority Creditor's Name

**6505 Market Street
Youngstown, OH 44512**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **3013****\$335.32**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Medical Services**

4.2

American Education Services

Nonpriority Creditor's Name

**ATTN: Bankruptcy
1200 North 7th Street
Harrisburg, PA 17102**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☒ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **6805****\$30,225.34**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify _____**Student Loans**

4.3

American Express

Nonpriority Creditor's Name

**P.O. Box 981540
El Paso, TX 79998**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number **2008****\$700.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.4	American Express Nonpriority Creditor's Name P.O. Box 981540 El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 1003 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	\$2,100.00
-----	---	---	-------------------

4.5	Ashley Homestore/SYNCB Nonpriority Creditor's Name ATTN: Bankruptcy PO Box 965064 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 1460 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	\$1,800.00
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4.6	Bank of America Nonpriority Creditor's Name ATTN: Bankruptcy Dept. 5401 North Beach Street FWTX 35 Fort Worth, TX 76137 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 6756 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card	\$5,300.00
-----	--	---	-------------------

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.7	Bank of America Nonpriority Creditor's Name ATTN: Bankruptcy P.O. Box 982234 El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7941</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$545.00
-----	---	---	-----------------

4.8	Bank of America Nonpriority Creditor's Name ATTN: Bankruptcy Dept. 5401 North Beach Street Fort Worth, TX 76137 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>8416</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$12,828.02
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4.9	Bank of America Nonpriority Creditor's Name P.O. Box 31785 Tampa, FL 33631 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>F422</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$2,693.74
-----	---	---	-------------------

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.1
0

Bank of America

Nonpriority Creditor's Name

**7105 Corporate Drive
Plano, TX 75024**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number _____

\$13,587.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.1
1

Barclays Bank Delaware

Nonpriority Creditor's Name

**700 Prides Crossing
Newark, DE 19713**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **1584**

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.1
2

Best Buy Credit Services

Nonpriority Creditor's Name

**P.O. Box 790441
Saint Louis, MO 63179**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **4938**

\$2,100.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.1
3**Best Buy/Capital One**

Nonpriority Creditor's Name

ATTN: Bankruptcy
26525 N Riverwoods Blvd
Lake Forest, IL 60045

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**4.1
4**Capital One**

Nonpriority Creditor's Name

P.O. Box 30253
Salt Lake City, UT 84130

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0331****\$1,000.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**4.1
5**Capital One**

Nonpriority Creditor's Name

ATTN: Bankruptcy
PO Box 30281
Salt Lake City, UT 84130

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9354****\$500.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.1
6**Capital One Bank (USA)**Last 4 digits of account number **0641****\$1,200.00**

Nonpriority Creditor's Name

ATTN: Bankruptcy**4851 Cox Road****Glen Allen, VA 23060**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Card**4.1
7**Chase**Last 4 digits of account number **6551****\$700.00**

Nonpriority Creditor's Name

P.O. Box 15298**Wilmington, DE 19850**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Card**4.1
8**Chase**Last 4 digits of account number **XXXX****\$12,000.00**

Nonpriority Creditor's Name

ATTN: Bankruptcy**P.O. Box 15298****Wilmington, DE 19850**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.1
9**Citi Cards**

Nonpriority Creditor's Name

ATTN: Bankruptcy/IRU Dept
PO Box 790034
Saint Louis, MO 63179

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **2308****\$3,300.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.2
0**Citi Cards**

Nonpriority Creditor's Name

ATTN: Bankruptcy
399 Park Avenue
New York, NY 10022

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1159****\$4,000.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.2
1**Citi Cards**

Nonpriority Creditor's Name

ATTN: Bankruptcy
P.O. Box 6004
Sioux Falls, SD 57117

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5771****\$3,500.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.2
2**Citi Cards**

Nonpriority Creditor's Name

ATTN: Bankruptcy/IRU Dept
PO Box 790034
Saint Louis, MO 63179

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0577****\$6,100.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.2
3**CitiBank**

Nonpriority Creditor's Name

ATTN: Bankruptcy
701 East 60th North
Sioux Falls, SD 57117

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5636****\$1,859.26**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.2
4**Comenity Bank**

Nonpriority Creditor's Name

ATTN: Bankruptcy
1 Righter Parkway #100
Wilmington, DE 19803

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **8961****\$210.16**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.2
5**Credit One**

Last 4 digits of account number **5859** **\$650.00**

Nonpriority Creditor's Name

ATTN: Bankruptcy
PO Box 98873

Las Vegas, NV 89193

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**4.2
6**Dick's Sporting Goods**

Last 4 digits of account number **2541** **\$1,100.00**

Nonpriority Creditor's Name

ATTN: Bankruptcy
345 Court Street
Coraopolis, PA 15108

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**4.2
7**Dick's Sporting Goods**

Last 4 digits of account number **6414** **\$2,575.00**

Nonpriority Creditor's Name

ATTN: Bankruptcy
345 Court Street
Coraopolis, PA 15108

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.2
8**Discover**

Nonpriority Creditor's Name

P.O. Box 30421**Salt Lake City, UT 84130**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9031****\$3,800.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.2
9**Discover**

Nonpriority Creditor's Name

ATTN: Bankruptcy**PO Box 15316****Wilmington, DE 19850**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **XXXX****\$16,162.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.3
0**Dr. Mark Braydich**

Nonpriority Creditor's Name

ATTN: Bankruptcy**45 E. Liberty Street****Hubbard, OH 44425**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$700.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Medical/Dental**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.3
1

E*Trade Bank/E*Trade Securities LLC

Nonpriority Creditor's Name

**ATTN: Bankruptcy
 Harborside 2
 200 Hudson Street, #501
 Jersey City, NJ 07311**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number **9958****\$7,077.12**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.3
2

Elan Financial Services

Nonpriority Creditor's Name

**ATTN: Bankruptcy
 PO Box 108
 Saint Louis, MO 63166**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$5,482.84

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Personal Loan**

4.3
3

Fifth Third Bank

Nonpriority Creditor's Name

**ATTN: Bankruptcy Dept.
 1830 E. Paris, SE
 Grand Rapids, MI 49546**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number **0341****\$14,509.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Personal Loan**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.3
4

First Merit Bank

Nonpriority Creditor's Name

**ATTN: Bankruptcy
 295 First Merit Circle
 Akron, OH 44307**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **212x**

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

4.3
5

Firstsource Advantage LLC

Nonpriority Creditor's Name

**205 Bryant Woods South
 Buffalo, NY 14228**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collection Agent**

4.3
6

FNB Omaha

Nonpriority Creditor's Name

**ATTN: Bankruptcy
 PO Box 3412
 Omaha, NE 68103**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **2820**

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.3
7**Genesis Bankcard**

Nonpriority Creditor's Name

ATTN: Bankruptcy
PO Box 4499
Beaverton, OR 97076

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9263****\$400.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.3
8**Home Savings and Loan**

Nonpriority Creditor's Name

275 West Federal Plaza
Youngstown, OH 44501

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$4,400.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Personal Loan**

4.3
9**Humility of Mary Health Partners**

Nonpriority Creditor's Name

ATTN: Bankruptcy
PO Box 1279
Dept #114465
Oaks, PA 19456

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **0285****\$121.80**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Medical Services**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.4
0

Humility of Mary Health Partners

Nonpriority Creditor's Name

ATTN: Bankruptcy
PO Box 1279
Dept #114465
Oaks, PA 19456

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$9.60

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Medical Services**

4.4
1

Loan Builders/Swift Financial LLC

Nonpriority Creditor's Name

3505 Silverside Road
Wilmington, DE 19810

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$18,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Personal Loan**

4.4
2

Macy's American Express

Nonpriority Creditor's Name

ATTN: Bankruptcy
PO Box 8097
Mason, OH 45040

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1904**

\$2,700.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.4
3

Merrick Bank

Nonpriority Creditor's Name

ATTN: Bankruptcy
10705 S. Jordan Gateway #200
South Jordan, UT 84095

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **5759**

\$3,800.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.4
4

Navient Solutions

Nonpriority Creditor's Name

ATTN: Bankruptcy
PO Box 9500
Wilkes Barre, PA 18773

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **XXXX**

\$51,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

**Student Loans that are in a
 deferral/conditional repayment plan to
 waive if paid for 10 years**

4.4
5

PayPal Credit

Nonpriority Creditor's Name

Bankruptcy Department
P.O. Box 5138
Lutherville Timonium, MD 21094

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.4
6**Portfolio Recovery Assoc. LLC**

Nonpriority Creditor's Name

ATTN: Bankruptcy
120 Corporate Blvd.
Norfolk, VA 23502

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **XXXX****\$17,117.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collection Agent/Debt Buyer for US Bank**4.4
7**Portfolio Recovery Associates**

Nonpriority Creditor's Name

ATTN: Bankruptcy Dept.
140 Corporate Blvd, Suite #1
Norfolk, VA 23502

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **XXXX****\$2,600.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Debt Buyer/Collection Agent for Synchrony Bank**4.4
8**Portfolio Recovery Associates, LLC**

Nonpriority Creditor's Name

P.O. Box 41067
Norfolk, VA 23541

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1629****\$12,116.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Debt Collection Agent/Buyer for US Bank**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.4
9

Sears Mastercard

Last 4 digits of account number **7490**

\$4,209.40

Nonpriority Creditor's Name

**ATTN: Bankruptcy Dept.
 P.O. Box 9001055
 Louisville, KY 40290**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.5
0

Struthers Federal Credit Union

Last 4 digits of account number _____

\$300.00

Nonpriority Creditor's Name

**ATTN: Bankruptcy Dept
 808 Poland Avenue
 Struthers, OH 44471**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Overdraft**

4.5
1

SYNCB

Last 4 digits of account number **3400**

\$500.00

Nonpriority Creditor's Name

**ATTN: Bankruptcy
 PO Box 965060
 Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.5
2**SYNCB/Home**

Nonpriority Creditor's Name

ATTN: Bankruptcy
950 Forrer Blvd
Dayton, OH 45420

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$1,879.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**4.5
3**SYNCB/MC**

Nonpriority Creditor's Name

ATTN: Bankruptcy
PO Box 965005
Orlando, FL 32896

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **XXXX****\$1,400.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**4.5
4**SYNCB/TJX CO DC**

Nonpriority Creditor's Name

P.O. Box 965015
Orlando, FL 32896

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **9845****\$2,434.44**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.5
5**SYNCB/Toys R Us**

Nonpriority Creditor's Name

**P.O. Box 965005
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$5,927.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.5
6**Synchrony Bank**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept.
P.O. Box 965033
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **7311****Unknown**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.5
7**U.S. Bank**

Nonpriority Creditor's Name

**1850 Osborn Avenue
Oshkosh, WI 54902**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1629****\$14,686.00**

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4.5
8**U.S. Bank**Last 4 digits of account number **2979****\$9,175.40**

Nonpriority Creditor's Name

P.O. Box 108**Saint Louis, MO 63166**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Card**4.5
9**U.S. Bank Cardmember Services**

Last 4 digits of account number _____

Unknown

Nonpriority Creditor's Name

P.O. Box 6352**Fargo, ND 58125**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Card****Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

AES**Bankruptcy Dept****PO Box 65093****Baltimore, MD 21264**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

AES**Bankruptcy Dept****PO Box 2461****Harrisburg, PA 17105**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

AES/NCT**ATTN: Bankruptcy****PO Box 61047****Harrisburg, PA 17106**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.2** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known)

Name and Address
Akron Children's Hospital
215 W. Bowery Street
Akron, OH 44308

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Akron Children's Hospital
ATTN: Bankruptcy
214 West Bowery Street
Akron, OH 44308

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Akron Children's Hospital
One Perkins Square
Akron, OH 44308

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.1** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Allied Interstate
P.O. Box 1954
Southgate, MI 48195

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Allied Interstate
P.O. Box 361445
Columbus, OH 43236

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Allied Interstate
ATTN: Bankruptcy
PO Box 981
Minneapolis, MN 55440

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Allied Interstate
ATTN: Bankruptcy
PO Box 1954
Southgate, MI 48195

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Allied Interstate
3000 Corporate Exchange Dr., 5th Fl
Columbus, OH 43231

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Allied Interstate LLC
P.O. Box 4000
Warrenton, VA 20188

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
AllTran Financial
PO Box 610
Sauk Rapids, MN 56379

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Alltran Financial LP
P.O. Box 722910
Houston, TX 77272

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known)

Name and Address
Alltran Financial LP
p.o. bOX 4044
Concord, CA 94524

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Alltran Financial LP
fka United Recovery Systems
500 North Course Drive
Houston, TX 77072

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Alltran Financial, LP
ATTN: Bankruptcy
PO Box 722929
Houston, TX 77272

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.32** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
American Express
ATTN: Bankruptcy
PO Box 981537
El Paso, TX 79998

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
American Express
P.O. Box 981535
El Paso, TX 79998

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
American Express
P.O. Box 31525
Salt Lake City, UT 84131

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
American Express
P.O. Box 1270
Newark, NJ 07101

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
American Express
ATTN: Bankruptcy
PO Box 981537
El Paso, TX 79998

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
American Express
P.O. Box 1270
Newark, NJ 07101

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
American Express
P.O. Box 981535
El Paso, TX 79998

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Bank of America
7105 Corporate Drive
Plano, TX 75024

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Name and Address
Bank of America
P.O. Box 15019
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Bank of America
ATTN: Bankruptcy
P.O. Box 982234
El Paso, TX 79998

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Bank of America, NA
ATTN: Bankruptcy
655 Papermill Road
Newark, DE 19711

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Barclays Bank Delaware
ATTN: Bankruptcy
PO Box 8803
Wilmington, DE 19899

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Barclays Bank Delaware
ATTN: Bankruptcy
400 White Clay Center Drive
Newark, DE 19711

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Best Buy
P.O. Box 790441
Saint Louis, MO 63179

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Best Buy Credit Services
P.O. Box 688911
Des Moines, IA 50368

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Best Buy Credit Services
P.O. Box 9001007
Louisville, KY 40290

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.12** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Calvary Portfolio
500 Summit Lake Drive #400
Valhalla, NY 10595

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One
ATTN: Bankruptcy
PO Box 30281
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One
P.O. Box 30253

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Salt Lake City, UT 84130

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
ATTN: Bankruptcy
PO Box 54529
Oklahoma City, OK 73154

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
P.O. Box 30285
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
15000 Capital One Drive
Henrico, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
ATTN: Bankruptcy
15000 Capital One Dr
Richmond, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
P.O. Box 6492
Carol Stream, IL 60197

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.14** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
P.O. Box 6492
Carol Stream, IL 60197

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
15000 Capital One Drive
Henrico, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
ATTN: Bankruptcy
PO Box 30281
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
ATTN: Bankruptcy
15000 Capital One Dr
Richmond, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Capital One
ATTN: Bankruptcy
PO Box 54529
Oklahoma City, OK 73154

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Capital One
ATTN: Bankruptcy
PO Box 30253
Salt Lake City, UT 84130

Line **4.15** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One
ATTN: Bankruptcy
PO Box 54529
Oklahoma City, OK 73154

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.15** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One
P.O. Box 6492
Carol Stream, IL 60197

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One
P.O. Box 30253
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One
15000 Capital One Drive
Henrico, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One
ATTN: Bankruptcy
PO Box 30253
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One
ATTN: Bankruptcy
15000 Capital One Dr
Richmond, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One Bank
ATTN: Bankruptcy
15000 Capital One Drive
Henrico, VA 23238

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Capital One Bank USA NA
ATTN: Bankruptcy
4851 Cox Road
Glen Allen, VA 23060

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Carson Smithfield LLC
ATTN: Bankruptcy
220 West Station Square Dr., 4th Fl
Pittsburgh, PA 15219

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Carson Smithfield LLC
ATTN: Bankruptcy

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

PO Box 9216
Old Bethpage, NY 11804

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Cavalry Portfolio Services LLC
ATTN: Bankruptcy Dept.
100 Cross Street #202
San Luis Obispo, CA 93401

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Cavalry Portfolio Services LLC
P.O. Box 27288
Tempe, AZ 85285

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Cavalry Portfolio Services LLC
P.O. Box 520
Valhalla, NY 10595

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Cavalry SPV 1, LLC
P.O. Box 1030
Hawthorne, NY 10532

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Cavalry SPV 1, LLC
500 Summit Lake Drive, Suite 400
Valhalla, NY 10595

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.54** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Chase
ATTN: BANKRUPTCY
P.O. Box 15298
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Chase
CARDMEMBER SERVICES
P.O. Box 6294
Carol Stream, IL 60197

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Chase
P.O. Box 15298
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Chase
P.O. Box 15123
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Chase
P.O. Box 15299
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Citi Cards

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

6716 Grade Lane
Building 9, Suite 910
Louisville, KY 40213

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
ATTN: Bankruptcy
399 Park Avenue
New York, NY 10022

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
ATTN: Bankruptcy
P.O. Box 6004
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
ATTN: Bankruptcy/IRU Dept
PO Box 790034
Saint Louis, MO 63179

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
P.O. Box 6497
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
P.O. Box 9001037
Louisville, KY 40290

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
ATTN: Bankruptcy/IRU Dept
PO Box 790034
Saint Louis, MO 63179

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
ATTN: Bankruptcy
P.O. Box 6004
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
P.O. Box 9001037
Louisville, KY 40290

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
ATTN: Bankruptcy
399 Park Avenue
New York, NY 10022

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
6716 Grade Lane
Building 9, Suite 910

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Louisville, KY 40213

Last 4 digits of account number _____

Name and Address

Citi Cards
ATTN: Bankruptcy
399 Park Avenue
New York, NY 10022

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
P.O. Box 9001037
Louisville, KY 40290

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Citi Cards
6716 Grade Lane
Building 9, Suite 910
Louisville, KY 40213

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.22** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Client Services, Inc.
3451 Harry Truman Blvd.
Saint Charles, MO 63301

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.33** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Client Services, Inc.
3451 Harry S. Truman Blvd.
Saint Charles, MO 63301

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.33** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Comenity Bank/Ulta
ATTN: Bankruptcy
PO Box 183003
Columbus, OH 43218

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Comenity Bank/Ulta
P.O. Box 659820
San Antonio, TX 78265

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Credit One Bank
ATTN: Bankruptcy
PO Box 98875
Las Vegas, NV 89193

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Credit One Bank
ATTN: Bankruptcy
PO Box 98872
Las Vegas, NV 89193

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Credit One Bank N.A.
P.O. Box 60500
City of Industry, CA 91716

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Credit One Bank N.A.
P.O. Box 98873
Las Vegas, NV 89193

Line **4.25** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Discover
P.O. Box 15316
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Discover
P.O. Box 742655
Cincinnati, OH 45274

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Discover
ATTN: Bankruptcy Department
P.O. Box 15316
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Discover
P.O. Box 15316
Wilmington, DE 19850

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Discover Bank
c/o DB Servicing Corporation
PO Box 3025
New Albany, OH 43054

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Discover Card
ATTN: Bankruptcy
PO Box 30421
Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Discover Fin Services LLC
ATTN: Bankruptcy
6500 New Albany Road East
New Albany, OH 43054

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.28** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

EGS Financial Care
ATTN: Bankruptcy
PO Box 1020, Dept #806
Horsham, PA 19044

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

EGS Financial Care, Inc.
4740 Baxter Road
Virginia Beach, VA 23462

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Ember Financial Services
ATTN: Bankruptcy
PO Box 660676
Dallas, TX 75266

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Last 4 digits of account number _____

Name and Address

Ember Financial Services
ATTN: Bankruptcy
PO Box 9201
Old Bethpage, NY 11804

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.31** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Fidelity Collections
P.O. Box 2055
Alliance, OH 44601

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Fidelity National Collections
P.O. Box 2055
Alliance, OH 44601

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Fidelity National Collections
ATTN: Bankruptcy
885 S Sawburg Avenue, Suite #103
Alliance, OH 44601

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Fidelity Properties
ATTN: Bankruptcy
885 S Sawburg Avenue, Suite #103
Alliance, OH 44601

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.30** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

FMA Alliance Ltd
12339 Cutten Road
Houston, TX 77066

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.48** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

FMA Alliance Ltd
ATTN: Bankruptcy
Dept #287
PO Box 4115
Concord, CA 94524

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

FMA Alliance Ltd
12339 Cutten Road
Houston, TX 77066

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

FMA Alliance Ltd
ATTN: Bankruptcy Dept
PO Box 2409
Houston, TX 77252

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

FMA Alliance Ltd
ATTN: Bankruptcy Dept
PO Box 2409
Houston, TX 77252

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.58** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known)

Name and Address
FMA Alliance Ltd
12339 Cutten Road
Houston, TX 77066

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.58** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
FMA Alliance Ltd
ATTN: Bankruptcy
Dept #287
PO Box 4115
Concord, CA 94524

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.58** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Genesis Bankcard
P.O. Box 4480
Beaverton, OR 97076

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.37** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Genesis Bankcard
P.O. Box 23039
Columbus, GA 31902

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.37** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Global Credit & Collections
5440 N. Cumberland Ave., Ste 300
Chicago, IL 60656

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Global Credit & Collections
P.O. Box 129
Linden, MI 48451

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Global Credit & Collections
ATTN: Bankruptcy
5440 N. Cumberland Ave., Ste 300
Chicago, IL 60656

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Great Lakes Higher Education
ATTN: Bankruptcy
PO Box 7860
Madison, WI 53707

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.44** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
IRS
c/o US Atty. General
US Dept of Justice & 10th Street NW
Room #5111
Washington, DC 20530

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **2.1** of (Check one):

☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
IRS
ATTN: Bankruptcy
1240 East 9th Street, Room #493
Cleveland, OH 44199

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **2.1** of (Check one):

☒ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
IRS

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **2.1** of (Check one):

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

c/o US Atty's Office ND of Ohio
801 West Superior Avenue #400
Cleveland, OH 44113

- ☒ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Jefferson Capital
ATTN: Bankruptcy Dept.
PO Box 7999
Saint Cloud, MN 56302

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.33** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Jefferson Capital Systems
c/o First National Collection Burea
610 Waltham Way
Sparks, NV 89434

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.33** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Jefferson Capital Systems
c/o First National Collection Burea
610 Waltham Way
Sparks, NV 89434

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.33** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Jefferson Capital Systems
PO Box 772813
Chicago, IL 60677

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.33** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Jefferson Capital Systems, LLC
16 McLeland Road
Saint Cloud, MN 56303

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.33** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Levy & Associates
4645 Executive Drive
Columbus, OH 43220

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.9** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Levy & Associates
4645 Executive Drive
Columbus, OH 43220

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.10** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Lloyd & McDaniel PLC
ATTN: Bankruptcy
PO Box 23200
Louisville, KY 40223

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.6** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Lloyd & McDaniel PLC
ATTN: Bankruptcy
11405 Park Road #200
Louisville, KY 40223

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.6** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Lloyd & McDaniel PLC
ATTN: Bankruptcy
PO Box 23200
Louisville, KY 40223

On which entry in Part 1 or Part 2 did you list the original creditor?
 Line **4.7** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Last 4 digits of account number _____

Name and Address

Lloyd & McDaniel PLC
ATTN: Bankruptcy
11405 Park Road #200
Louisville, KY 40223

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.7** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Loan Builder/Swift Financial LLC
ATTN: Bankruptcy
2211 North First Street
San Jose, CA 95131

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.41** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Loan Builder/Swift Financial LLC
c/o CT Corporation Systems
4400 Easton Commons Way #125
Columbus, OH 43219

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.41** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Macy's
P.O. Box 78008
Phoenix, AZ 85062

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.42** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Macy's
Bankruptcy Processing
P.O. Box 8053
Mason, OH 45040

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.42** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Macy's
P.O. Box 183084
Columbus, OH 43218

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.42** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Macy's
P.O.Box 8058
Mason, OH 45040

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.42** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Macy's American Express
ATTN: Bankruptcy
PO Box 8097
Mason, OH 45040

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.42** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Macy's American Express
P.O. Box 9001108
Louisville, KY 40290

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.42** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Mercy Health
ATTN: Bankruptcy
Duke Drive #400
Mason, OH 45040

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.39** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Merrick Bank
ATTN: Bankruptcy
10705 S. Jordan Gateway #200
South Jordan, UT 84095

Line **4.43** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Merrick Bank
ATTN: Bankruptcy
PO Box 9201
Old Bethpage, NY 11804

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.43** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Merrick Bank
ATTN: Bankruptcy
PO Box 660702
Dallas, TX 75266

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.43** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
National Enterprise Systems
29125 Solon Road
Solon, OH 44139

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
National Enterprise Systems
ATTN: Bankruptcy
PO Box 1280
Oaks, PA 19456

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
National Enterprise Systems
ATTN: Bankruptcy
2479 Edison Blvd, Unit A
Twinsburg, OH 44087

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.8** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Navient Solutions
ATTN: Bankruptcy
123 S. Justison Street
Wilmington, DE 19801

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.44** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
North American Credit Services
ATTN: Bankruptcy
PO Box 182221
Chattanooga, TN 37422

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.39** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
North American Credit Services
ATTN: Bankruptcy
2810 Walker Road
Chattanooga, TN 37421

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.39** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
North American Credit Services
ATTN: Bankruptcy
PO Box 182221
Chattanooga, TN 37422

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.40** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

North American Credit Services
ATTN: Bankruptcy
2810 Walker Road
Chattanooga, TN 37421

Line **4.40** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

PayPal Credit
P.O. Box 105658
Atlanta, GA 30348

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.45** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

PayPal Credit
P.O. Box 960080
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.45** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

PayPal Credit
PO Box 5138
Lutherville Timonium, MD 21094

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.45** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

PayPal Credit
PO Box 105658
Atlanta, GA 30348

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.45** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Pep Boy's/SYNCB
ATTN: Bankruptcy
PO Box 965035
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Pep Boy's/SYNCB
ATTN: Bankruptcy
PO Box 960061
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
PO Box 41067
Norfolk, VA 23541

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy Dept.
120 Corporate Blvd., Suite #100
Norfolk, VA 23502

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
P.O. Box 12914
Norfolk, VA 23541

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy Dept.
120 Corporate Blvd., Suite #100
Norfolk, VA 23502

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
PO Box 12914
Norfolk, VA 23541

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.59** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
140 Corporate Blvd.
Norfolk, VA 23502

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.59** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy Dept.
120 Corporate Blvd., Suite #100
Norfolk, VA 23502

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
PO Box 41067
Norfolk, VA 23541

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
120 Corporate Blvd.
Norfolk, VA 23502

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Associates
ATTN: Bankruptcy Dept.
140 Corporate Blvd
Norfolk, VA 23502

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Associates
ATTN: Bankruptcy Dept.
PO Box 12914
Norfolk, VA 23541

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Associates
ATTN: Bankruptcy Dept.
140 Corporate Blvd
Norfolk, VA 23502

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.59** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Associates
ATTN: Bankruptcy Dept.
140 Corporate Blvd
Norfolk, VA 23502

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Associates, LLC
P.O. Box 4115
Concord, CA 94524

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Last 4 digits of account number _____

Name and Address

Portfolio Recovery Associates, LLC
P.O. Box 41067
Norfolk, VA 23541

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.57** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Radius Global Solutions LLC
ATTN: Bankruptcy
PO Box 390905
Minneapolis, MN 55439

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.21** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Sears Credit Cards
ATTN: Bankruptcy
PO Box 6282
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.49** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Sears/CBNA
P.O. Box 6283
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.49** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Sears/CBNA
P.O. Box 6217
Sioux Falls, SD 57117

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.49** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

Sears/CBNA
133200 Smith Road
Cleveland, OH 44130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.49** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

St. Elizabeth /Mercy Health
ATTN: Bankruptcy Department
1044 Belmont Avenue
Youngstown, OH 44504

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.39** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

St. Elizabeth/Mercy Health
P.O. Box 630826
Cincinnati, OH 45263

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.40** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

SYNCB
ATTN: Bankruptcy
PO Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

SYNCB/Ashley Homestore
ATTN: Bankruptcy
PO Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address

SYNCB/Dick's Sporting Goods

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

ATTN: Bankruptcy
PO Box 965005
Orlando, FL 32896

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Dick's Sporting Goods
P.O. Box 960012
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.26** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Dick's Sporting Goods
ATTN: Bankruptcy
PO Box 965005
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Dick's Sporting Goods
P.O. Box 960012
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Pep Boys
ATTN: Bankruptcy
PO Box 965037
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Toys R Us
P.O. Box 965013
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.55** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Toys R Us
P.O. Box 965016
Orlando, FL 32896-5016

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.55** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Toys R Us
Bankruptcy Department
P.O. Box 965060
Orlando, FL 32896

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.55** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Ulta/Comenity Bank
ATTN: Bankruptcy
PO Box 183043
Columbus, OH 43218

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1			Total Claim	
	6a.	Domestic support obligations	6a.	\$ <u>0.00</u>
	6b.	Taxes and certain other debts you owe the government	6b.	\$ <u>10,564.30</u>
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <u>0.00</u>

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Total claims from Part 2	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ 10,564.30
	6f. Student loans	6f.	<div style="background-color: #e0e0e0; text-align: center; padding: 2px;">Total Claim</div> \$ 81,225.34
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 230,190.10
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 311,415.44

Fill in this information to identify your case:

Debtor 1	Andrew James Garchar		
	First Name	Middle Name	Last Name
Debtor 2	Tammy Noel Feo-Garchar		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF OHIO		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?**
☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Nissan Motor Acceptance Corp Attn: Bankruptcy PO Box 660360 Dallas, TX 75266	2018 Nissan Sentra (jointly leased) for 36 months No equity Current Mileage 98,082 Lease Expires 10/2021 Lease Balance as of 03/2019 is \$18,221.30

Fill in this information to identify your case:

Debtor 1	Andrew James Garchar		
	First Name	Middle Name	Last Name
Debtor 2	Tammy Noel Feo-Garchar		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO			
Case number _____ (if known)			

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☒ No
☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

- ☐ Schedule D, line _____
- ☐ Schedule E/F, line _____
- ☐ Schedule G, line _____

3.2

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

- ☐ Schedule D, line _____
- ☐ Schedule E/F, line _____
- ☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1 Andrew James Garchar

Debtor 2 Tammy Noel Feo-Garchar
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY**Official Form 106I****Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed
- ☐ Not employed

OccupationEducator / Occupational Therapy**Employer's name**Trumbull Education Serv / OT Plus Ltd**Employer's address****Debtor 2 or non-filing spouse**

- ☒ Employed
- ☐ Not employed

Case ManagerColumbiana County**How long employed there?**25 years6 weeks**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ <u>5,055.92</u>	\$ <u>2,293.20</u>
3.	Estimate and list monthly overtime pay.	+\$ <u>0.00</u>	+\$ <u>0.00</u>
4.	Calculate gross income. Add line 2 + line 3.	\$ <u>5,055.92</u>	\$ <u>2,293.20</u>

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 5,055.92	\$ 2,293.20
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 870.00	\$ 456.67
5b. Mandatory contributions for retirement plans	5b. \$ 707.82	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 173.40	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 96.00	\$ 0.00
5h. Other deductions. Specify: <u>Life Insurance</u>	5h.+ \$ 106.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 1,953.22	\$ 456.67
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 3,102.70	\$ 1,836.53
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 2,812.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify:	8h.+ \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 2,812.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 5,914.70	+ \$ 1,836.53 = \$ 7,751.23
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		
	11. +\$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$	7,751.23
13. Do you expect an increase or decrease within the year after you file this form?		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes. Explain: Debtor Wife started a job on or about 04/15/19. She makes \$13.50 per hour and works approximately 40 hours per week.		

Combined
monthly income

Fill in this information to identify your case:

Debtor 1 Andrew James Garchar

Debtor 2 Tammy Noel Feo-Garchar
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.☒ Yes. Does Debtor 2 live in a separate household?☐ No☒ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes.

Fill out this information for each dependent.....

Do not state the dependents names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son

14

☐ No☒ Yes

Son

17

☐ No☒ Yes

Daughter

18

☐ No☒ Yes☐ No☐ Yes3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,593.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 100.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 100.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	250.00
6b. Water, sewer, garbage collection	6b. \$	70.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	582.00
6d. Other. Specify: _____	6d. \$	0.00
7. Food and housekeeping supplies	7. \$	800.00
8. Childcare and children's education costs	8. \$	0.00
9. Clothing, laundry, and dry cleaning	9. \$	150.00
10. Personal care products and services	10. \$	80.00
11. Medical and dental expenses	11. \$	150.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	250.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	120.00
14. Charitable contributions and religious donations	14. \$	15.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	419.12
15d. Other insurance. Specify: _____	15d. \$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$	0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	580.00
17b. Car payments for Vehicle 2	17b. \$	393.05
17c. Other. Specify: 2018 Nissan Lease	17c. \$	262.18
17d. Other. Specify: St. Nicholas School	17d. \$	150.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	0.00
19. Other payments you make to support others who do not live with you. Specify: _____	\$	0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
21. Other: Specify: _____	21. +\$	0.00
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	6,064.35
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	1,425.00
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	7,489.35
23. Calculate your monthly net income.		
23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I.	23a. \$	7,751.23
23b. Copy your monthly expenses from line 22c above.	23b. -\$	7,489.35
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	261.88
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain here:		

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Fill in this information to identify your case:

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**
 (Spouse, if filing)
 United States Bankruptcy Court for the: **NORTHERN DISTRICT OF OHIO**
 Case number _____
 (If known)

Check if this is:

- ☐ An amended filing
☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

☐

Official Form 106J-2

Schedule J-2: Your Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Do you and Debtor 1 maintain separate households?

☐ No. Do not complete this form.
☒ Yes

2. Do you have dependents? ☐ No

Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.

Do not state the dependents names.

Fill out this information for each dependent.....

Dependent's relationship to Debtor 2

Dependent's age

Does dependent live with you?

Son

14

☐ No
☒ Yes

Son

17

☐ No
☒ Yes

Daughter

18

☐ No
☒ Yes

☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **500.00**

If not included in line 4:

4a. Real estate taxes

4a. \$ **0.00**

4b. Property, homeowner's, or renter's insurance

4b. \$ **0.00**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

4c. Home maintenance, repair, and upkeep expenses	4c. \$	<u>50.00</u>
4d. Homeowner's association or condominium dues	4d. \$	<u>0.00</u>
5. Additional mortgage payments for your residence , such as home equity loans	5. \$	<u>0.00</u>
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	<u>150.00</u>
6b. Water, sewer, garbage collection	6b. \$	<u>50.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<u>50.00</u>
6d. Other. Specify: _____	6d. \$	<u>0.00</u>
7. Food and housekeeping supplies	7. \$	<u>200.00</u>
8. Childcare and children's education costs	8. \$	<u>0.00</u>
9. Clothing, laundry, and dry cleaning	9. \$	<u>75.00</u>
10. Personal care products and services	10. \$	<u>40.00</u>
11. Medical and dental expenses	11. \$	<u>60.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<u>150.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	<u>100.00</u>
14. Charitable contributions and religious donations	14. \$	<u>0.00</u>
15. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<u>0.00</u>
15b. Health insurance	15b. \$	<u>0.00</u>
15c. Vehicle insurance	15c. \$	<u>0.00</u>
15d. Other insurance. Specify: _____	15d. \$	<u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$	<u>0.00</u>
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	<u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$	<u>0.00</u>
17c. Other. Specify: _____	17c. \$	<u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	<u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$	<u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	<u>0.00</u>
20b. Real estate taxes	20b. \$	<u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$	<u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$	<u>0.00</u>
21. Other: Specify: _____	21. +\$	<u>0.00</u>
22. Your monthly expenses. Add lines 5 through 21. The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.	\$ <u>1,425.00</u>	

23. Line not used on this form.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.☐ Yes.

Explain here: _____

Fill in this information to identify your case:

Debtor 1	Andrew James Garchar		
	First Name	Middle Name	Last Name
Debtor 2	Tammy Noel Feo-Garchar		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF OHIO</u>			
Case number (if known) _____			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Andrew James Garchar

Andrew James Garchar

Signature of Debtor 1

Date 6/11/2019

X /s/ Tammy Noel Feo-Garchar

Tammy Noel Feo-Garchar

Signature of Debtor 2

Date 6/11/2019

Fill in this information to identify your case:

Debtor 1 **Andrew James Garchar**
 First Name Middle Name Last Name

Debtor 2 **Tammy Noel Feo-Garchar**
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF OHIO**

Case number _____
 (if known)

☐ Check if this is an amended filing

Official Form 107**Statement of Financial Affairs for Individuals Filing for Bankruptcy****4/19**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:**Dates Debtor 1 lived there**

From-To:

Debtor 2 Prior Address:**Dates Debtor 2 lived there**

☐ Same as Debtor 1
239 Clingan Road
Struthers, OH 44471
 From-To:
2015 to 12/2018

From-To:

☐ Same as Debtor 1
44251 State Route 558
Columbiana, OH 44408

☐ Same as Debtor 1
 From-To:
12/2018 to 06/2019

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2 Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

Debtor 1**Debtor 2**

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$20,223.68	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$3,069.36
	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$6,970.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$0.00
For last calendar year: (January 1 to December 31, 2018)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$101,942.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$0.00
For the calendar year before that: (January 1 to December 31, 2017)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$51,509.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$0.00

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

- ☐ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
-----------------------------	------------------	-------------------	----------------------	--------------------------

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☒ No
☐ Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
----------------------------	------------------	-------------------	----------------------	--

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No
☒ Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
So-Fi Lending vs. Andrew James Garchar 2017 CV 1332	Civil	Mahoning County Common Pleas 120 Market Street Youngstown, OH 44503	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
garnishment proceedings			
Bank of America NA vs. Andrew James Garchar 2018 CV 761	Civil	Mahoning County Common Pleas 120 Market Street Youngstown, OH 44503	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
garnishment			
Bank of America NA vs. Andrew James Garchar 2017 CVF 422	Civil	Struthers Municipal Court 6 Elm Street Struthers, OH 44471	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Bank of America NA vs Andrew James Garchar 2018 JD 903	Judgment Lien	Mahoning County Common Pleas 120 Market Street Youngstown, OH 44503	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Bank of America NA vs Andrew James Garchar 2018 JD 2347	Judgment Lien	Mahoning County Common Pleas 120 Market Street Youngstown, OH 44503	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known)

Case title Case number	Nature of the case	Court or agency	Status of the case
State of Ohio vs. Tammy N. Feo-Garchar 19 CRA 41, 19 CRA 42(A),(B),(C),(D),(E)	Criminal cases for Complicity/Violation of TPO, Complicity Theft	Struthers Municipal Court 6 Elm Street Struthers, OH 44471	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Prelim Hearing 05/1/19			
Tammy Noel Feo-Garchar vs. Andrew James Garchar 2018 DR 599	Divorce	Mahoning County Common Pleas 120 Market Street Youngstown, OH 44503	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
So-Fi Lending vs Andrew James Garchar 2018 JD 205	Judgment Lien	Mahoning County Common Pleas 120 Market Street Youngstown, OH 44503	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
---------------------------	--	------	-----------------------

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
---------------------------	---------------------------------------	-----------------------	--------

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☐ No
☒ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Dates you contributed	Value
Charity's Name Address (Number, Street, City, State and ZIP Code)			
Church	Cash	2018-2019	\$150.00

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Goodwill	Clothing, etc.	2018-2019	\$250.00

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost
--	---	-------------------	------------------------

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Daniel Daniluk, LLC 1129 Niles-Cortland Road, SE Warren, OH 44484-2542 jchaney@daniluklaw.com	Attorney Fees of \$1,000 (plus \$335 filing fee)	04/24/19 - \$247 05/10/19 - \$260 06/10/19 - \$828	\$1,000.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
--------------------------------	---	-----------------------------------	-------------------

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
---	---	--	------------------------

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
---------------	---	------------------------

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
 Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☐ No
☒ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
E*Trade	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input checked="" type="checkbox"/> Brokerage <input type="checkbox"/> Other___	March 2019 - Debtor Husband sold stock and closed account	\$1,573.96
Struthers Federal Credit Union ATTN: Bankruptcy Dept 808 Poland Avenue Struthers, OH 44471	XXXX-	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	The minor child, Rocco, had an account which was closed after the parties filed for divorce.	\$800.00
Struthers Federal Credit Union ATTN: Bankruptcy Dept 808 Poland Avenue Struthers, OH 44471	XXXX-	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	The minor child, Andrew, Jr., had an account which was closed after the parties filed for divorce.	\$800.00
Struthers Federal Credit Union ATTN: Bankruptcy Dept 808 Poland Avenue Struthers, OH 44471	XXXX-	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	The parties daughter, Gianna, had an account which was closed after the parties filed for divorce.	\$800.00

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
---	--	-----------------------	-----------------------

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number *(if known)*

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	-----------------------

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☐ No
☒ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Gianna Garchar 239 Clingham Road Struthers, OH 44471	Victory Funds PO Box 182593 Columbus, OH 43218	College account with Victory Funds Debtor Tammy Feo-Garchar is the custodian	Unknown
Gianna Garchar 239 Clingham Road Struthers, OH 44471	Tammy Feo-Garchar	The children have savings bonds given to them by family over the years for birthdays, special occasions and holidays.	\$1,500.00
Andrew Garchar, Jr., a minor 239 Clingham Road Struthers, OH 44471	Tammy Feo-Garchar	The children have savings bonds given to them by family over the years for birthdays, special occasions and holidays.	\$1,500.00
Rocco Garchar, a minor 239 Clingham Road Struthers, OH 44471	Tammy Feo-Garchar	The children have savings bonds given to them by family over the years for birthdays, special occasions and holidays.	\$1,500.00

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- ☒ **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- ☒ **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- ☒ **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number *(if known)*

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.
☐ Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
☐ Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Andrew James Garchar

Andrew James Garchar
Signature of Debtor 1

/s/ Tammy Noel Feo-Garchar

Tammy Noel Feo-Garchar
Signature of Debtor 2

Date 6/11/2019

Date 6/11/2019

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 **Andrew James Garchar**
 First Name Middle Name Last Name

Debtor 2 **Tammy Noel Feo-Garchar**
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF OHIO**

Case number _____
 (if known)

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
- ☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Bank of America NA	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property: 239 Clingan Road Struthers, OH 44471 Mahoning County		
securing debt:		
Creditor's name: Bank of America NA	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: avoid lien using 11 U.S.C. § 522(f)	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property: 239 Clingan Road Struthers, OH 44471 Mahoning County		
securing debt:		
Creditor's name: C&F Finance Company	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property: 2017 Nissan Altima 103,079 miles		
securing debt:		

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

securing debt:

Retain and pay without reaffirmation

Creditor's name: **Chrysler Capital**

Description of property: **2015 Dodge Durango 72,000 miles**

securing debt:

☐ Surrender the property.
☐ Retain the property and redeem it.
☐ Retain the property and enter into a Reaffirmation Agreement.
☒ Retain the property and [explain]:
Retain and pay

☐ No
☒ Yes

Creditor's name: **Mr. Cooper**

Description of property: **239 Clingan Road Struthers, OH 44471 Mahoning County**

securing debt:

☐ Surrender the property.
☐ Retain the property and redeem it.
☐ Retain the property and enter into a Reaffirmation Agreement.
☒ Retain the property and [explain]:
Retain and pay without reaffirmation

☐ No
☒ Yes

Creditor's name: **So-Fi Lending**

Description of property: **239 Clingan Road Struthers, OH 44471 Mahoning County**

securing debt:

☐ Surrender the property.
☐ Retain the property and redeem it.
☐ Retain the property and enter into a Reaffirmation Agreement.
☒ Retain the property and [explain]:
avoid lien using 11 U.S.C. § 522(f)

☐ No
☒ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Lessor's name:
 Description of leased
 Property:

☐ No
☐ Yes

Lessor's name:
 Description of leased
 Property:

☐ No
☐ Yes

Lessor's name:
 Description of leased
 Property:

☐ No
☐ Yes

Lessor's name:
 Description of leased
 Property:

☐ No
☐ Yes

Lessor's name:
 Description of leased
 Property:

☐ No
☐ Yes

Lessor's name:

☐ No

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Description of leased
Property:

☐ Yes

Lessor's name:
Description of leased
Property:

☐ No

☐ Yes

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Andrew James Garchar

Andrew James Garchar

Signature of Debtor 1

X /s/ Tammy Noel Feo-Garchar

Tammy Noel Feo-Garchar

Signature of Debtor 2

Date 6/11/2019

Date 6/11/2019

Fill in this information to identify your case:

Debtor 1 Andrew James Garchar

Debtor 2 Tammy Noel Feo-Garchar
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Ohio

Case number _____
(if known)

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

☐ Not married. Fill out Column A, lines 2-11.

☒ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

☐ Married and your spouse is NOT filing with you. You and your spouse are:

☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 5,055.92	\$ 511.56
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm		
	Debtor 1	
Gross receipts (before all deductions)	\$ 5,483.33	
Ordinary and necessary operating expenses	-\$ 3,425.50	
Net monthly income from a business, profession, or farm	\$ 2,057.83	
	Copy here -> \$ 2,057.83	\$ 0.00
6. Net income from rental and other real property		
	Debtor 1	
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental and other real property	\$ 0.00	
	Copy here -> \$ 0.00	\$ 0.00
7. Interest, dividends, and royalties	\$ 0.00	\$ 0.00

Debtor 1
Debtor 2**Andrew James Garchar**
Tammy Noel Feo-Garchar

Case number (if known)

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00	\$ 0.00	\$ 0.00
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$ 0.00	\$ 0.00
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$ 0.00 \$ 0.00 Total amounts from separate pages, if any. + \$ 0.00	\$ 0.00 \$ 0.00 + \$ 0.00	\$ 0.00 \$ 0.00 \$ 0.00
11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$ 7,113.75	\$ 511.56
	= \$ 7,625.31 Total current monthly income	

Part 2: Determine Whether the Means Test Applies to You**12. Calculate your current monthly income for the year.** Follow these steps:12a. Copy your total current monthly income from line 11 **Copy line 11 here=>**\$ **7,625.31**

Multiply by 12 (the number of months in a year)

x 12

12b. The result is your annual income for this part of the form

12b. \$ **91,503.72****13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

OH

Fill in the number of people in your household.

5

Fill in the median family income for your state and size of household.
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.13. \$ **98,454.00****14. How do the lines compare?**14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*
Go to Part 3.14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*
Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Andrew James Garchar**Andrew James Garchar**

Signature of Debtor 1

Date **6/11/2019**

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

X /s/ Tammy Noel Feo-Garchar**Tammy Noel Feo-Garchar**

Signature of Debtor 2

Date **6/11/2019**

MM / DD / YYYY

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **12/01/2018** to **05/31/2019**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Trumbull Cty Education Serv**

Income by Month:

6 Months Ago:	<u>12/2018</u>	<u>\$5,055.92</u>
5 Months Ago:	<u>01/2019</u>	<u>\$5,055.92</u>
4 Months Ago:	<u>02/2019</u>	<u>\$5,055.92</u>
3 Months Ago:	<u>03/2019</u>	<u>\$5,055.92</u>
2 Months Ago:	<u>04/2019</u>	<u>\$5,055.92</u>
Last Month:	<u>05/2019</u>	<u>\$5,055.92</u>
Average per month:		<u>\$5,055.92</u>

Line 5 - Income from operation of a business, profession, or farm

Source of Income: **OT Plus Ltd**

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	<u>12/2018</u>	<u>\$3,448.00</u>	<u>\$3,695.00</u>	<u>\$-247.00</u>
5 Months Ago:	<u>01/2019</u>	<u>\$5,778.00</u>	<u>\$4,320.00</u>	<u>\$1,458.00</u>
4 Months Ago:	<u>02/2019</u>	<u>\$6,195.00</u>	<u>\$4,095.00</u>	<u>\$2,100.00</u>
3 Months Ago:	<u>03/2019</u>	<u>\$6,031.00</u>	<u>\$2,619.00</u>	<u>\$3,412.00</u>
2 Months Ago:	<u>04/2019</u>	<u>\$5,724.00</u>	<u>\$2,912.00</u>	<u>\$2,812.00</u>
Last Month:	<u>05/2019</u>	<u>\$5,724.00</u>	<u>\$2,912.00</u>	<u>\$2,812.00</u>
Average per month:		<u>\$5,483.33</u>	<u>\$3,425.50</u>	
Average Monthly NET Income:				<u>\$2,057.83</u>

Debtor 1 **Andrew James Garchar**
 Debtor 2 **Tammy Noel Feo-Garchar**

Case number (if known) _____

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **12/01/2018** to **05/31/2019**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Columbiana County**

Income by Month:

6 Months Ago:	<u>12/2018</u>	<u>\$0.00</u>
5 Months Ago:	<u>01/2019</u>	<u>\$0.00</u>
4 Months Ago:	<u>02/2019</u>	<u>\$0.00</u>
3 Months Ago:	<u>03/2019</u>	<u>\$0.00</u>
2 Months Ago:	<u>04/2019</u>	<u>\$857.22</u>
Last Month:	<u>05/2019</u>	<u>\$2,212.14</u>
Average per month:		<u>\$511.56</u>

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C.
§ 101(8) as "incurred by an individual
primarily for a personal, family, or
household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under
one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan
for family farmers or
fishermen

Chapter 13 - Voluntary repayment plan
for individuals with regular
income

**You should have an attorney review your
decision to file for bankruptcy and the choice of
chapter.**

Chapter 7: Liquidation

\$245	filing fee
\$75	administrative fee
+	\$15 trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:
http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:
http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:
<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court
Northern District of Ohio

In re **Andrew James Garchar**
Tammy Noel Feo-Garchar

Debtor(s)

Case No.

Chapter **7**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	1,000.00
Prior to the filing of this statement I have received	\$	1,000.00
Balance Due	\$	0.00

2. \$ **335.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
☒ Debtor ☐ Other (specify):
4. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
d. [Other provisions as needed]
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

6/11/2019

Date

/s/ John H. Chaney, III

John H. Chaney, III

Signature of Attorney

Daniel Daniluk, LLC

1129 Niles-Cortland Road, SE

Warren, OH 44484-2542

330-609-9999 Fax: 330-609-9990

jchaney@daniluklaw.com

Name of law firm

**United States Bankruptcy Court
Northern District of Ohio**

In re **Andrew James Garchar**
Tammy Noel Feo-Garchar

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **6/11/2019**

/s/ Andrew James Garchar

Andrew James Garchar

Signature of Debtor

Date: **6/11/2019**

/s/ Tammy Noel Feo-Garchar

Tammy Noel Feo-Garchar

Signature of Debtor

AES
Bankruptcy Dept
PO Box 65093
Baltimore, MD 21264

AES
Bankruptcy Dept
PO Box 2461
Harrisburg, PA 17105

AES/NCT
ATTN: Bankruptcy
PO Box 61047
Harrisburg, PA 17106

Akron Children's Hospital
6505 Market Street
Youngstown, OH 44512

Akron Children's Hospital
215 W. Bowery Street
Akron, OH 44308

Akron Children's Hospital
One Perkins Square
Akron, OH 44308

Akron Children's Hospital
ATTN: Bankruptcy
214 West Bowery Street
Akron, OH 44308

Allied Interstate
P.O. Box 1954
Southgate, MI 48195

Allied Interstate
3000 Corporate Exchange Dr., 5th Fl
Columbus, OH 43231

Allied Interstate
ATTN: Bankruptcy
PO Box 1954
Southgate, MI 48195

Allied Interstate
ATTN: Bankruptcy
PO Box 981
Minneapolis, MN 55440

Allied Interstate
P.O. Box 361445
Columbus, OH 43236

Allied Interstate LLC
P.O. Box 4000
Warrenton, VA 20188

AllTran Financial
PO Box 610
Sauk Rapids, MN 56379

Alltran Financial LP
P.O. Box 722910
Houston, TX 77272

Alltran Financial LP
fka United Recovery Systems
500 North Course Drive
Houston, TX 77072

Alltran Financial LP
p.o. BOX 4044
Concord, CA 94524

Alltran Financial, LP
ATTN: Bankruptcy
PO Box 722929
Houston, TX 77272

American Education Services
ATTN: Bankruptcy
1200 North 7th Street
Harrisburg, PA 17102

American Express
P.O. Box 981540
El Paso, TX 79998

American Express
ATTN: Bankruptcy
PO Box 981537
El Paso, TX 79998

American Express
P.O. Box 981535
El Paso, TX 79998

American Express
P.O. Box 1270
Newark, NJ 07101

American Express
P.O. Box 31525
Salt Lake City, UT 84131

Ashley Homestore/SYNCB
ATTN: Bankruptcy
PO Box 965064
Orlando, FL 32896

Bank of America
ATTN: Bankruptcy Dept.
5401 North Beach Street
FWTX 35
Fort Worth, TX 76137

Bank of America
ATTN: Bankruptcy
P.O. Box 982234
El Paso, TX 79998

Bank of America
ATTN: Bankruptcy Dept.
5401 North Beach Street
Fort Worth, TX 76137

Bank of America
P.O. Box 31785
Tampa, FL 33631

Bank of America
7105 Corporate Drive
Plano, TX 75024

Bank of America
P.O. Box 15019
Wilmington, DE 19850

Bank of America NA
ATTN: Bankruptcy
100 North Tryon Street
Charlotte, NC 28255

Bank of America, NA
ATTN: Bankruptcy
655 Papermill Road
Newark, DE 19711

Barclays Bank Delaware
700 Prides Crossing
Newark, DE 19713

Barclays Bank Delaware
ATTN: Bankruptcy
PO Box 8803
Wilmington, DE 19899

Barclays Bank Delaware
ATTN: Bankruptcy
400 White Clay Center Drive
Newark, DE 19711

Best Buy
P.O. Box 790441
Saint Louis, MO 63179

Best Buy Credit Services
P.O. Box 790441
Saint Louis, MO 63179

Best Buy Credit Services
P.O. Box 688911
Des Moines, IA 50368

Best Buy Credit Services
P.O. Box 9001007
Louisville, KY 40290

Best Buy/Capital One
ATTN: Bankruptcy
26525 N Riverwoods Blvd
Lake Forest, IL 60045

C&F Finance Company
ATTN: Bankruptcy Dept
PO Box 2129
Richmond, VA 23218

Calvary Portfolio
500 Summit Lake Drive #400
Valhalla, NY 10595

Capital One
P.O. Box 30253
Salt Lake City, UT 84130

Capital One
ATTN: Bankruptcy
PO Box 30281
Salt Lake City, UT 84130

Capital One
15000 Capital One Drive
Henrico, VA 23238

Capital One
ATTN: Bankruptcy
15000 Capital One Dr
Richmond, VA 23238

Capital One
P.O. Box 6492
Carol Stream, IL 60197

Capital One
ATTN: Bankruptcy
PO Box 54529
Oklahoma City, OK 73154

Capital One
P.O. Box 30285
Salt Lake City, UT 84130

Capital One
ATTN: Bankruptcy
PO Box 30253
Salt Lake City, UT 84130

Capital One Bank
ATTN: Bankruptcy
15000 Capital One Drive
Henrico, VA 23238

Capital One Bank (USA)
ATTN: Bankruptcy
4851 Cox Road
Glen Allen, VA 23060

Capital One Bank USA NA
ATTN: Bankruptcy
4851 Cox Road
Glen Allen, VA 23060

Carson Smithfield LLC
ATTN: Bankruptcy
220 West Station Square Dr., 4th Fl
Pittsburgh, PA 15219

Carson Smithfield LLC
ATTN: Bankruptcy
PO Box 9216
Old Bethpage, NY 11804

Cash Central
6785 Bobcat Way #200
Dublin, OH 43016

Cavalry Portfolio Services LLC
ATTN: Bankruptcy Dept.
500 Summit Lake #400
Valhalla, NY 10595

Cavalry Portfolio Services LLC
ATTN: Bankruptcy Dept.
100 Cross Street #202
San Luis Obispo, CA 93401

Cavalry Portfolio Services LLC
P.O. Box 520
Valhalla, NY 10595

Cavalry Portfolio Services LLC
P.O. Box 27288
Tempe, AZ 85285

Cavalry SPV 1, LLC
P.O. Box 1030
Hawthorne, NY 10532

Cavalry SPV 1, LLC
500 Summit Lake Drive, Suite 400
Valhalla, NY 10595

Chase
P.O. Box 15298
Wilmington, DE 19850

Chase
ATTN: Bankruptcy
P.O. Box 15298
Wilmington, DE 19850

Chase
P.O. Box 15299
Wilmington, DE 19850

Chase
P.O. Box 15123
Wilmington, DE 19850

Chase
CARDMEMBER SERVICES
P.O. Box 6294
Carol Stream, IL 60197

Chrysler Capital
ATTN: Bankruptcy
PO Box 961275
Fort Worth, TX 76161

Chrysler Capital
ATTN: Bankruptcy
PO Box 961278
Fort Worth, TX 76161

Citi Cards
ATTN: Bankruptcy/IRU Dept
PO Box 790034
Saint Louis, MO 63179

Citi Cards
ATTN: Bankruptcy
399 Park Avenue
New York, NY 10022

Citi Cards
ATTN: Bankruptcy
P.O. Box 6004
Sioux Falls, SD 57117

Citi Cards
6716 Grade Lane
Building 9, Suite 910
Louisville, KY 40213

Citi Cards
P.O. Box 6497
Sioux Falls, SD 57117

Citi Cards
P.O. Box 9001037
Louisville, KY 40290

CitiBank
ATTN: Bankruptcy
701 East 60th North
Sioux Falls, SD 57117

Client Services, Inc.
3451 Harry Truman Blvd.
Saint Charles, MO 63301

Client Services, Inc.
3451 Harry S. Truman Blvd.
Saint Charles, MO 63301

Comenity Bank
ATTN: Bankruptcy
1 Righter Parkway #100
Wilmington, DE 19803

Comenity Bank/Ulta
ATTN: Bankruptcy
PO Box 183003
Columbus, OH 43218

Comenity Bank/Ulta
P.O. Box 659820
San Antonio, TX 78265

Credit One
ATTN: Bankruptcy
PO Box 98873
Las Vegas, NV 89193

Credit One Bank
ATTN: Bankruptcy
PO Box 98875
Las Vegas, NV 89193

Credit One Bank
ATTN: Bankruptcy
PO Box 98872
Las Vegas, NV 89193

Credit One Bank N.A.
P.O. Box 60500
City of Industry, CA 91716

Credit One Bank N.A.
P.O. Box 98873
Las Vegas, NV 89193

Dick's Sporting Goods
ATTN: Bankruptcy
345 Court Street
Coraopolis, PA 15108

Discover
P.O. Box 30421
Salt Lake City, UT 84130

Discover
ATTN: Bankruptcy
PO Box 15316
Wilmington, DE 19850

Discover
P.O. Box 15316
Wilmington, DE 19850

Discover
ATTN: Bankruptcy Department
P.O. Box 15316
Wilmington, DE 19850

Discover
P.O. Box 742655
Cincinnati, OH 45274

Discover Bank
c/o DB Servicing Corporation
PO Box 3025
New Albany, OH 43054

Discover Card
ATTN: Bankruptcy
PO Box 30421
Salt Lake City, UT 84130

Discover Fin Services LLC
ATTN: Bankruptcy
6500 New Albany Road East
New Albany, OH 43054

Dr. Mark Braydich
ATTN: Bankruptcy
45 E. Liberty Street
Hubbard, OH 44425

E*Trade Bank/E*Trade Securities LLC
ATTN: Bankruptcy
Harborside 2
200 Hudson Street, #501
Jersey City, NJ 07311

EGS Financial Care
ATTN: Bankruptcy
PO Box 1020, Dept #806
Horsham, PA 19044

EGS Financial Care, Inc.
4740 Baxter Road
Virginia Beach, VA 23462

Elan Financial Services
ATTN: Bankruptcy
PO Box 108
Saint Louis, MO 63166

Ember Financial Services
ATTN: Bankruptcy
PO Box 660676
Dallas, TX 75266

Ember Financial Services
ATTN: Bankruptcy
PO Box 9201
Old Bethpage, NY 11804

Fidelity Collections
P.O. Box 2055
Alliance, OH 44601

Fidelity National Collections
P.O. Box 2055
Alliance, OH 44601

Fidelity National Collections
ATTN: Bankruptcy
885 S Sawburg Avenue, Suite #103
Alliance, OH 44601

Fidelity Properties
ATTN: Bankruptcy
885 S Sawburg Avenue, Suite #103
Alliance, OH 44601

Fifth Third Bank
ATTN: Bankruptcy Dept.
1830 E. Paris, SE
Grand Rapids, MI 49546

First Merit Bank
ATTN: Bankruptcy
295 First Merit Circle
Akron, OH 44307

Firstsource Advantage LLC
205 Bryant Woods South
Buffalo, NY 14228

FMA Alliance Ltd
12339 Cutten Road
Houston, TX 77066

FMA Alliance Ltd
ATTN: Bankruptcy Dept
PO Box 2409
Houston, TX 77252

FMA Alliance Ltd
ATTN: Bankruptcy
Dept #287
PO Box 4115
Concord, CA 94524

FNB Omaha
ATTN: Bankruptcy
PO Box 3412
Omaha, NE 68103

Genesis Bankcard
ATTN: Bankruptcy
PO Box 4499
Beaverton, OR 97076

Genesis Bankcard
P.O. Box 4480
Beaverton, OR 97076

Genesis Bankcard
P.O. Box 23039
Columbus, GA 31902

Global Credit & Collections
5440 N. Cumberland Ave., Ste 300
Chicago, IL 60656

Global Credit & Collections
P.O. Box 129
Linden, MI 48451

Global Credit & Collections
ATTN: Bankruptcy
5440 N. Cumberland Ave., Ste 300
Chicago, IL 60656

Great Lakes Higher Education
ATTN: Bankruptcy
PO Box 7860
Madison, WI 53707

Home Savings and Loan
275 West Federal Plaza
Youngstown, OH 44501

Humility of Mary Health Partners
ATTN: Bankruptcy
PO Box 1279
Dept #114465
Oaks, PA 19456

IRS
c/o Bankruptcy Dept
PO Box 7346
Philadelphia, PA 19101

IRS
c/o US Atty. General
US Dept of Justice & 10th Street NW
Room #5111
Washington, DC 20530

IRS
c/o US Atty's Office ND of Ohio
801 West Superior Avenue #400
Cleveland, OH 44113

IRS
ATTN: Bankruptcy
1240 East 9th Street, Room #493
Cleveland, OH 44199

Jefferson Capital
ATTN: Bankruptcy Dept.
PO Box 7999
Saint Cloud, MN 56302

Jefferson Capital Systems
c/o First National Collection Bureau
610 Waltham Way
Sparks, NV 89434

Jefferson Capital Systems
PO Box 772813
Chicago, IL 60677

Jefferson Capital Systems, LLC
16 McLeland Road
Saint Cloud, MN 56303

Kabbage
ATTN: Bankruptcy
PO Box 77073
Atlanta, GA 30357

Kabbage
ATTN: Bankruptcy
730 Peachtree Street NE
Atlanta, GA 30308

Levy & Associates
4645 Executive Drive
Columbus, OH 43220

Lloyd & McDaniel PLC
ATTN: Bankruptcy
PO Box 23200
Louisville, KY 40223

Lloyd & McDaniel PLC
ATTN: Bankruptcy
11405 Park Road #200
Louisville, KY 40223

Loan Builder/Swift Financial LLC
ATTN: Bankruptcy
2211 North First Street
San Jose, CA 95131

Loan Builder/Swift Financial LLC
c/o CT Corporation Systems
4400 Easton Commons Way #125
Columbus, OH 43219

Loan Builders/Swift Financial LLC
3505 Silverside Road
Wilmington, DE 19810

Loan Me
1900 College Blvd
Anaheim, CA 92806

Macy's
P.O. Box 78008
Phoenix, AZ 85062

Macy's
P.O.Box 8058
Mason, OH 45040

Macy's
P.O. Box 183084
Columbus, OH 43218

Macy's
Bankruptcy Processing
P.O. Box 8053
Mason, OH 45040

Macy's American Express
ATTN: Bankruptcy
PO Box 8097
Mason, OH 45040

Macy's American Express
P.O. Box 9001108
Louisville, KY 40290

Mercy Health
ATTN: Bankruptcy
Duke Drive #400
Mason, OH 45040

Merrick Bank
ATTN: Bankruptcy
10705 S. Jordan Gateway #200
South Jordan, UT 84095

Merrick Bank
ATTN: Bankruptcy
PO Box 660702
Dallas, TX 75266

Merrick Bank
ATTN: Bankruptcy
PO Box 9201
Old Bethpage, NY 11804

Mr. Cooper
8590 Cypress Waters Blvd.
Coppell, TX 75019

Mr. Cooper
P.O. Box 60516
City of Industry, CA 91716-0516

National Enterprise Systems
29125 Solon Road
Solon, OH 44139

National Enterprise Systems
ATTN: Bankruptcy
2479 Edison Blvd, Unit A
Twinsburg, OH 44087

National Enterprise Systems
ATTN: Bankruptcy
PO Box 1280
Oaks, PA 19456

Navient Solutions
ATTN: Bankruptcy
PO Box 9500
Wilkes Barre, PA 18773

Navient Solutions
ATTN: Bankruptcy
123 S. Justison Street
Wilmington, DE 19801

Nissan Motor Acceptance Corp
Attn: Bankruptcy
PO Box 660360
Dallas, TX 75266

Nissan Motor Acceptance Corp.
2901 Kinwest Parkway
Irving, TX 75063

North American Credit Services
ATTN: Bankruptcy
PO Box 182221
Chattanooga, TN 37422

North American Credit Services
ATTN: Bankruptcy
2810 Walker Road
Chattanooga, TN 37421

OneMain Financial
ATTN: Bankruptcy
601 N.W. 2nd Street
Evansville, IN 47708

OneMain Financial
ATTN: Bankruptcy
PO Box 59
Evansville, IN 47701

PayPal Credit
Bankruptcy Department
P.O. Box 5138
Lutherville Timonium, MD 21094

PayPal Credit
P.O. Box 105658
Atlanta, GA 30348

PayPal Credit
PO Box 105658
Atlanta, GA 30348

PayPal Credit
PO Box 5138
Lutherville Timonium, MD 21094

PayPal Credit
P.O. Box 960080
Orlando, FL 32896

Pep Boy's/SYNCB
ATTN: Bankruptcy
PO Box 965035
Orlando, FL 32896

Pep Boy's/SYNCB
ATTN: Bankruptcy
PO Box 960061
Orlando, FL 32896

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
120 Corporate Blvd.
Norfolk, VA 23502

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
PO Box 41067
Norfolk, VA 23541

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy Dept.
120 Corporate Blvd., Suite #100
Norfolk, VA 23502

Portfolio Recovery Assoc. LLC
P.O. Box 12914
Norfolk, VA 23541

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
PO Box 12914
Norfolk, VA 23541

Portfolio Recovery Assoc. LLC
ATTN: Bankruptcy
140 Corporate Blvd.
Norfolk, VA 23502

Portfolio Recovery Associates
ATTN: Bankruptcy Dept.
140 Corporate Blvd, Suite #1
Norfolk, VA 23502

Portfolio Recovery Associates
ATTN: Bankruptcy Dept.
140 Corporate Blvd
Norfolk, VA 23502

Portfolio Recovery Associates
ATTN: Bankruptcy Dept.
PO Box 12914
Norfolk, VA 23541

Portfolio Recovery Associates, LLC
P.O. Box 41067
Norfolk, VA 23541

Portfolio Recovery Associates, LLC
P.O. Box 4115
Concord, CA 94524

Radius Global Solutions LLC
ATTN: Bankruptcy
PO Box 390905
Minneapolis, MN 55439

Sears Credit Cards
ATTN: Bankruptcy
PO Box 6282
Sioux Falls, SD 57117

Sears Mastercard
ATTN: Bankruptcy Dept.
P.O. Box 9001055
Louisville, KY 40290

Sears/CBNA
P.O. Box 6283
Sioux Falls, SD 57117

Sears/CBNA
133200 Smith Road
Cleveland, OH 44130

Sears/CBNA
P.O. Box 6217
Sioux Falls, SD 57117

So-Fi Lending
ATTN: Bankruptcy
375 Healdsburg Avenue, #2
Healdsburg, CA 95448

So-Fi Lending
ATTN: Bankruptcy
PO Box 29372
San Francisco, CA 94129

So-Fi Lending
ATTN: Bankruptcy
Dept #3534
PO Box 123534
Dallas, TX 75312

So-Fi Lending Corp
ATTN: Bankruptcy
One Letter Drive
Suite A, Suite #4700
San Francisco, CA 94129

St. Elizabeth /Mercy Health
ATTN: Bankruptcy Department
1044 Belmont Avenue
Youngstown, OH 44504

St. Elizabeth/Mercy Health
P.O. Box 630826
Cincinnati, OH 45263

Struthers Federal Credit Union
ATTN: Bankruptcy Dept
808 Poland Avenue
Struthers, OH 44471

SYNCB
ATTN: Bankruptcy
PO Box 965060
Orlando, FL 32896

SYNCB
ATTN: Bankruptcy
PO Box 965033
Orlando, FL 32896

SYNCB/Ashley Homestore
ATTN: Bankruptcy
PO Box 965060
Orlando, FL 32896

SYNCB/Dick's Sporting Goods
ATTN: Bankruptcy
PO Box 965005
Orlando, FL 32896

SYNCB/Dick's Sporting Goods
P.O. Box 960012
Orlando, FL 32896

SYNCB/Home
ATTN: Bankruptcy
950 Forrer Blvd
Dayton, OH 45420

SYNCB/MC
ATTN: Bankruptcy
PO Box 965005
Orlando, FL 32896

SYNCB/Pep Boys
ATTN: Bankruptcy
PO Box 965037
Orlando, FL 32896

SYNCB/TJX CO DC
P.O. Box 965015
Orlando, FL 32896

SYNCB/Toys R Us
P.O. Box 965005
Orlando, FL 32896

SYNCB/Toys R Us
P.O. Box 965013
Orlando, FL 32896

SYNCB/Toys R Us
Bankruptcy Department
P.O. Box 965060
Orlando, FL 32896

SYNCB/Toys R Us
P.O. Box 965016
Orlando, FL 32896-5016

Synchrony Bank
Attn: Bankruptcy Dept.
P.O. Box 965033
Orlando, FL 32896

U.S. Bank
1850 Osborn Avenue
Oshkosh, WI 54902

U.S. Bank
P.O. Box 108
Saint Louis, MO 63166

U.S. Bank Cardmember Services
P.O. Box 6352
Fargo, ND 58125

Ulta/Comenity Bank
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